

Attention: All Providers

National Provider Identifier (NPI) Collection Form Now Available in Spreadsheet Format

N.C. Medicaid is actively collecting NPI numbers from providers. Providers are required to report NPI numbers to Medicaid no later than March 31, 2007. To accommodate organizations with large numbers of providers, an NPI spreadsheet is now available on the DMA Web site. The spreadsheet and its instructions can be found here: http://www.dhhs.state.nc.us/dma/NPI.htm. The spreadsheet can be completed for both group and individual provider numbers. Required fields for the spreadsheet are similar to the NPI Collection Form. Blocks A through L on the spreadsheet must be completed.

Printed Name/Title/Date, Phone Number, Fax Number and Email Address — List the person completing this information and the contact information for questions.

- A. Group (G)/Individual (I) You may submit both group and individual information on the same spreadsheet. Enter the group information first by putting a "G" in column A. The indicator G is for the Group NPI. Next, enter an "I" for each individual in the group. Please complete a separate line to report the NPI for each Medicaid Provider Number.
- **B. Carolina ACCESS Provider** Place a "Y" or "N" in column B for each Medicaid Provider Number to indicate whether the group or the individual is a Carolina ACCESS provider.
- C. Medicaid Provider Number Enter the seven- or eight-digit numeric or alphanumeric Medicaid Provider Number. Please check the most recent remittance advice (RA) to make sure the provider number is accurately recorded. Complete a separate line to report the NPI for each Medicaid Provider Number.
- **D. National Provider Number** (**NPI**) Enter the 10-digit number assigned by NPPES for each Medicaid Provider Number. In addition to submitting the spreadsheet, providers must submit a copy of their NPPES certification letter for each NPI reported. If you do not submit this letter, your NPI will not be accepted. If you need to apply for an NPI, go to https://nppes.cms.hhs.gov/NPPES/Welcome.do and click on the link to *National Provider Identifier*. Follow the instructions for applying.

If you need a copy of your NPPES Certification letter, contact the NPI Enumerator at 1-800-465-3203, or go to http://questions.cms.hhs.gov/copy of your NPPES letter to have another NPI notification generated. If the provider was enumerated via EFI, the health care provider must contact the EFI organization (EFIO) for a copy of the EFIO's notification. Notifications generated by the NPPES are created in the same manner in which they were originally issued (i.e., NPI notification letter for paper applicants or an e-mail notification for Web-based applicants).

E. Taxonomy — Enter the 10 digit code ending in X. You may submit up to 15 taxonomies. If you need to report additional taxonomy codes, please complete the "Additional Taxonomy Form" located at http://www.ncdhhs.gov/dma/npi/taxonomy.htm. For a listing of taxonomy codes, go to http://www.wpc-edi.com/taxonomy. You will need this taxonomy information when applying for an NPI.

• F. Organization/Individual Name

- o *Organization Name* The name of the group or business. Please check the most recent RA to verify how your organization is listed in our provider system. If the name on the spreadsheet does not match the name listed in the provider system, the updates will not be made.
- o *Individual Name* The name of the provider as listed in our system or on the NPPES certification. If the name on the spreadsheet does not match the name listed in the provider system the updates will not be made.
- **G-L. Physical/Accounting Address** Must be completed even if the addresses are the same.
- o *Physical Address* The location where services are performed or care is coordinated. Please be sure to include the ZIP Code+4 number.
- o *Accounting Address* The address where payments, remittance advices and correspondence are sent. Please be sure to include the ZIP Code+4 number. Please check the most recent RA to determine the accounting address listed in our provider system. If the accounting address is the same as the physical address, please indicate "SAME" in this block.

NOTE: If the address on this spreadsheet does not match what is currently in our provider system, we will automatically update our records with the address provided on the NPI spreadsheet. For reporting changes other than address, complete the Provider Change Form which is located here: www.ncdhhs.gov/dma/forms.html.

Upon completion, choose one of the options below to send the spreadsheet to DMA:

Please Mail to:	Please Fax to:	Please E-mail to:
DMA Provider Services	(919) 715-7140	npi.dma@ncmail.net
Attention: NPI Form		
2501 Mail Service Center		
Raleigh, NC 27699-2501		

NPI – Get it! Share It! Use It! Getting one is free – Not having one can be costly!

EDS, 1-800-688-6696 or 919-851-8888